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Department of the Treasury Internal Revenue Service

# **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047 Open to Public

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

Inspection

<u> </u>	or the	e 2010 calendar year, or tax year beginning OCT 1, 2010 and ending	<u>SEP 30</u>	<u>, 2011</u>				
Вс	heck if	C Name of organization	D Emplo	yer identific	cation number			
	Addre chang	THE CORPS NETWORK						
	Name chang	Doing Business As		52-1	480202			
	Initial  return	Number and street (or P.O. box if mail is not delivered to street address)  Room/su	ite E Teleph	one number	,			
	Termir	1100 G STREET, NW 1000		202-	737-6272			
	Amend	City or town, state or country, and ZIP + 4	G Gross red		5,744,061.			
	Application		H(a) Is the	s a group re				
	pendir	F Name and address of principal officer MARY ELLEN ARDOUNY		ffiliates?	Yes X No			
		SAME AS C ABOVE	H(b) Are a	ll affiliates inc				
IT	ax-ex				list (see instructions)			
Jν	Vebsi	te: ► WWW.CORPSNETWORK.ORG			n number 🕨			
K F	or <u>m</u> of	organization: X Corporation			State of legal domicile: DC			
	rt I	Summary						
_	1	Briefly describe the organization's mission or most significant activities SEE SCHE	DULE O					
Activities & Governance								
rna	2	Check this box I if the organization discontinued its operations or disposed of m	ore than 25%	of its net as	sets			
Š	3	Number of voting members of the governing body (Part VI, line 1a)		3	17			
Ğ			0	4	17			
တ္	5	Total number of individuals employed in calendar year 2010 (Part V-line 2a)	المستعادة	5	21			
ij	6	Number of independent voting members of the governing body (Part VI, line 1b).  Total number of individuals employed in calendar year 2010 (Part VI, line 2a).  Total number of volunteers (estimate if necessary).	181	6	0			
햕	7 a	Total unrelated business revenue from Part VIII, column (C), line 12	092 100	7a	0.			
⋖		Total unrelated business revenue from Part VIII, column (C), line 12  Net unrelated business taxable income from Form 990-T, line 34		7b	0.			
		181 501	1 Prior Y		Current Year			
•	8	Contributions and grants (Part VIII, line 1h)		8,838.	5,113,319.			
nue		Program service revenue (Part VIII, line 2g)		2,324.	628,801.			
Revenue		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		276.	1,941.			
æ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.			
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	4 59	1,438.	5,744,061.			
~		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		4,840.	2,441,016.			
		Benefits paid to or for members (Part IX, column (A), line 4)	2,5.	0.	0.			
S		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1.12	9,811.	1,146,502.			
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.			
per		Total fundraising expenses (Part IX, column (D), line 25)						
ٽرِ∹		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	8.4	1,909.	871,798.			
-7		Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		6,560.	4,459,316.			
		Revenue less expenses Subtract line 18 from line 12		4,878.	1,284,745.			
P S S		Trevende less expenses outstact line to from line 12	Beginning of C		End of Year			
anc	20	Total assets (Part X, line 16)		3,730.	3,190,067.			
Ass		Total liabilities (Part X, line 26)		7,770.	759,362.			
Net Assets or Fund Balances		Net assets or fund balances Subtract line 21 from line 20		5,960.	2,430,705.			
	rt II	Signature Block	1,11	<u> </u>	2,430,703.			
		alties of perjury, I declare that I have examined this return, including accompanying schedules and sta	taments and to	the hest of m	v knowledge and helief it is			
		ct, and complete. Declaration of preparer (other than officer) is based on all information of which prep						
<u>,</u>	001100	Many 19 1 1 h A and a land to the miles proper	arci nas ariy kire	Jan II	12			
Sign		Signature of officer	D	ate	104			
Her		MARY ELLEN ARDOUNY, INTERIM CEO						
1161	-	Type or print name and title		-				
		Print√vne preparer's name Preparer's signature	Date ,	Check	PTIN			
Paid		JOANN WOODSON Preder's signature	1.//	2 self-employe	<b>-</b>			
Prep		Firm's name CALIBRE CPA GROUP PLLC	-l		<del>-</del>			
Use		Firm's address 1850 K STREET, N.W.	r	ırm's EIN 🛌				
U3E	OH17	WASHINGTON, DC 20006	,	hone no /	2021231_0000			
Max	Al 11	RS discuss this return with the preparer shown above? (see instructions)	1 P	hone no. (	202)331-9880 X Yes No			

# Form 990 (2010) THE CORPS NETWORK Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1_	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		<u> X</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect		37	
_	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		٦,
6	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		<u> </u>
0	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to	_		v
7	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I Did the organization receive or hold a conservation easement, including easements to preserve open space,	6		X
'	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			<u> </u>
Ü	Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X; or provide	0		
•	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		٠,,	
	Schedule D, Parts XI, XII, and XIII	12a	X	<del> </del>
D	Was the organization included in consolidated, independent audited financial statements for the tax year?			<b>.</b>
12	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
13 14a	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E  Did the organization maintain an office, employees, or agents outside of the United States?	13		
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	14a		X
	and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	טרו		
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	L	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		Х
<b>2</b> 0a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that		1 -	
	operate one or more hospitals must attach audited financial statements (see instructions)	20b	<u>L                                    </u>	<u> </u>
		Form	990	2010)

			Yes	NO
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			47
	column (A), line 27 If "Yes," complete Schedule I, Parts I and III	22		<u> </u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	00		Х
240	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	23		
244	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
_	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	_27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
_	Instructions for applicable filing thresholds, conditions, and exceptions)	00-		v
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		X
b b	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	ZOU		
Ū	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete		i	
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			_
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	-	X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		X
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of			
00	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  Yes X No			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?  If "Yes," complete Schedule R, Part V, line 2	26		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36		^
J1	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	37	<b></b> -	1 22
<b></b>	Note. All Form 990 filers are required to complete Schedule O	38	X	
-			990 (	2010)
			(	

Form	990 (2010) THE CORPS NETWORK 52-1480	202	Р	age <b>5</b>
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter 0 if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 21			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			:
	to file Form 8282?	7c		x
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<u> </u>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting			
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter		1	
а	Initiation fees and capital contributions included on Part VIII, line 12	1		
þ	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	1		
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders 11a	1		
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them )	_	1	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	<u> </u>	<del> </del>
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	ļ		1
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	<u> </u>		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	<b> </b>	<del> </del>
	Note. See the instructions for additional information the organization must report on Schedule O		1	
b	Enter the amount of reserves the organization is required to maintain by the states in which the	1		
	organization is licensed to issue qualified health plans	1		
С	Enter the amount of reserves on hand	<u> </u>	<u> </u>	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	ļ	X
<u>b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	<u>L</u>	<u> </u>
		r	, aan	10040

032005 12-21-10

Form 990 (2010) THE CORPS NETWORK 52-1480202 Page 6 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions. Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 1a **b** Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? X 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 X 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 Does the organization have members or stockholders? Х 6 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? X 7a b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7b X Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? 8a Х b Each committee with authority to act on behalf of the governing body? Х 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) Yes No 10a Does the organization have local chapters, branches, or affiliates? 10<u>a</u> b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 10b 11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? 11a Х b Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 X 12a b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? X 12b c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done X 12c 13 Does the organization have a written whistleblower policy? Х 13 14 Does the organization have a written document retention and destruction policy? Х 14 Did the process for determining compensation of the following persons include a review and approval by independent 15 persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15a b Other officers or key employees of the organization X 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? Х 16a b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed NONE Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website Another's website X Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial 19 statements available to the public State the name, physical address, and telephone number of the person who possesses the books and records of the organization 20

Form **990** (2010)

NANCY SIEGAL - 202-737-6272

 $1100~\mathrm{G}$  STREET, NW, #1000, WASHINGTON

20005

# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII

#### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees, if any, See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

Check this box if neither the o<u>rganization nor any related organizati</u>on compensated any current officer, director, or trustee.

- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons.

(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average	1		Pos		1		Reportable	Reportable	Estimated
	hours per	(cl	neck	all	that	app	ly)	compensation	compensation	amount of
	week	ig.						from	from related	other
	(describe hours for	a die				휼		the organization	organizations (W-2/1099-MISC)	compensation from the
	related	stee	ruste	]		Suac	Ì	(W-2/1099-MISC)	(44 2) 1033 (41100)	organization
	organizations	重	onalt		ploye	E 8	ļ	(**************************************		and related
	ın Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
DAVID MURAKI		-	-		-	-				
CHAIR/PAST CHAIR	2.00	X		X		_		0.	0.	0.
STEVE DUBIEL										
DEV CHAIR/SECRETARY/PERSONNEL CHAIR	2.00	X		X			_	0.	0.	0.
DUSTIN WOODMAN							1			
MEMBERSHIP CHAIR	2.00	X		X				0.	0.	0.
LEN PRICE										•
SECRETARY/AT LARGE EXEC COMMITTEE ME	2.00	X		X		<u>L</u>		0.	0.	0.
MIKE BASSETT	ļ									•
TREASURER	2.00	X	L	X		L		0.	0.	0.
DEBORAH DORSETT				ļ						
PAST CHAIR/BOARD MEMBER	2.00	X		X	L.	<u> </u>	<u>_</u>	0.	0.	0.
ANTHONY ANIKEEFF					ļ		ļ			
BOARD MEMBER	2.00	X		<u>L</u> .		ļ	<u>_</u>	0.	0.	0.
HARRY BRUELL					{		ļ			_
CHAIR	2.00	X	<u> </u>	X	ļ	Ļ		0.	0.	0.
ANN COCHRANE				1				1	_	
DEVELOPMENT CHAIR	2.00	X		X	ļ_			0.	0.	0.
LORI GODOROV							]			
BOARD MEMBER	2.00	X	<u> </u>	<u> </u>	-	<u> </u>	ļ	0.	0.	0.
JERRY KEIR		_								_
BOARD MEMBER	2.00	X	<u> </u>	<u> </u>	┡	↓_	<u> </u>	0.	0.	0.
JOHN LEONG										_
BOARD MEMBER	2.00	X	<u> </u>	_	<u> </u>	-	<u> </u>	0.	0.	0.
REGINALD MCCASKILL						ĺ	Ì			
BOARD MEMBER	2.00	X	<u> </u>		┡-	-	<b>⊢</b> –	0.	0.	0.
LARRY MCCRACKEN										
BOARD MEMBER	2.00	X	<b>├</b>	<u> </u>	<u> </u>	<del> </del>	┝-	0.	0.	0.
JOAN SHARPE										
BOARD MEMBER	2.00	X	├	<u> </u>	↓_	-	<del> </del>	0.	0.	0.
MARIE WALKER	0.00				ļ				_	
BOARD MEMBER	2.00	X	<u> </u>	—	<del> </del>	├	├-	0.	0.	0.
LAURA HERRIN	2 00					-				
BOARD MEMBER	2.00	1 X	<u> </u>	Ц	1	<u></u>		0.	0.	0. Form <b>990</b> (2010)

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Part VII   Section A. Officers, Directors	, Trustees, Key Er	nplo	oyee			High	est			—т		
(A)	( <b>B</b> ) Average			Pos	C) utior	1		(D)	(E)		(F	
Name and title	hours per	(cl				t app	oly)	Reportable compensation	Reportable compensation		Estim: amoui	
	week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the	from related organizations (W-2/1099-MISC	;)	oth compen from organiz and re organiz	sation the zation lated
SALLY T. PROUTY							-			1		
PRESIDENT/CEO	40.00	<u> </u>	ļ	X	_		<u> </u>	132,983.		0.	14,	<u>626.</u>
MARTY O'BRIEN	40.00			х				81,584.		0.	11	109.
SENIOR VICE PRESIDENT ROBERT SPATH	40.00	╁	<del>                                     </del>	Λ		1	-	01,304.		<del>-  </del>		103.
COO	40.00	_		х			-	0.		0.		0.
1b Sub-total		1	L	Ш.	L	▶	J	214,567.		0.	25,	735.
c Total from continuation sheets to Pa	art VII, Section A					>		0.	····	0.		0.
d Total (add lines 1b and 1c)								214,567.		0.	<u>25,</u>	735.
2 Total number of individuals (including to compensation from the organization)		ose	liste	ed a	bov	e) w	ho r	eceived more than \$100	),000 in reportable			1
compensation from the organization	·								<del>-</del>		Ye	
3 Did the organization list any former off	ficer, director or tru	stee	e, ke	y en	nplo	yee,	, or l	highest compensated ei	mployee on			
line 1a? If "Yes," complete Schedule J										ŀ	3	X
4 For any individual listed on line 1a, is the and related organizations greater than								· ·	the organization			х
5 Did any person listed on line 1a receive									idual for services	ŀ	4	^
rendered to the organization? If "Yes,"						•					5	Х
Section B. Independent Contractors								<b>_</b>				
1 Complete this table for your five higher	st compensated in	depe	ende	ent d	cont	tract	ors 1	that received more than	\$100,000 of comp	ensa	ation fron	1
the organization NONE	···							(B)			(C)	
Name and busin								Description of	services	C	ompensa	tion
Total number of independent contract	ors (including but r	not l	ımıte	ed to	the	ose I	ıste	ld above) who received r	nore than			
\$100,000 in compensation from the or						0						
											Form <b>99</b>	<b>0</b> (2010)

<u>ra</u>	IL VIII	Statement of Never	iue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts ts	1 a	Federated campaigns	1a				7	
Contributions, gifts, grants and other similar amounts	b	Membership dues	1b		1			
g,s	С	Fundraising events	1c		1			
ar a		Related organizations	1d		1			
S,E		Government grants (contribut		315,935.	1			
F		All other contributions, gifts, gran		•	]			
혈		similar amounts not included abo		797,384.				
늘	g	Noncash contributions included in lines		•				
<u>용</u>	_	Total. Add lines 1a-1f	· · · · · · · · · · · · · · · · · · ·	<u> </u>	5,113,319.			
				Business Code	1			
ا بو	2 a	MEMBERSHIP DUES	3	900099	347,971.	347,971.		
اه چَ	b	HEALTH INSURANCE	E COMMI	900099	127,401.	127,401.		
용립	С	REGISTRATIONS		900099	90,686.	90,686.	_	
e ve	d	CONTRACT REVENU	JE	900099	62,743.	62,743.		
Program Service Revenue	е							
₫	f	All other program service reve	enue					
_	g	Total. Add lines 2a-2f			628,801.			
	3	Investment income (including	dividends, inter-	est, and				
		other similar amounts)		<b>&gt;</b>	1,941.			1,941.
	4	Income from investment of ta	x-exempt bond p	oroceeds <b>&gt;</b>				
	5	Royalties						1/2///
			(ı) Real	(II) Personal	_			i
	6 a			ļ	_			
	b	•						
	C	, ,		L	_			
		Net rental income or (loss)		<u> </u>		_		
	7 a	Gross amount from sales of	(i) Securities	(II) Other	-{			
		assets other than inventory			-			
	D	Less cost or other basis						
	_	and sales expenses			+			
		Gain or (loss) Net gain or (loss)			-			
		Gross income from fundraisin	a avente (not		<del>                                       </del>			<u></u>
_ je	o a	including \$	of					
Other Revenue		contributions reported on line	<del></del>					
<u>~</u>		Part IV, line 18	a a					
ᇐ	h	Less direct expenses	a b		†			
ō		Net income or (loss) from fund		<b></b>	†			
		Gross income from gaming ac	=					
		Part IV, line 19	а					
	b	Less direct expenses	b					
l		Net income or (loss) from gam		<b></b>				
		Gross sales of inventory, less						
		and allowances	а	. [				
	b	Less cost of goods sold	b					
	с	Net income or (loss) from sale	s of inventory	<b></b>	]			
Ī		Miscellaneous Revenu		Business Code				
ſ	11 a							
l	b							
]	С							
	d	All other revenue						
	е	Total. Add lines 11a-11d		<b></b>				
	12	Total revenue See instructions.		<u> </u>	5,744,061.	628,801.	0.	
03200 12-21	9 ∙10							Form <b>990</b> (2010)

Section 501(c)(3) and 501(c)(4) organizations must complete all columns

	All other organizations must comp				
	not include amounts reported on lines 6b, Bb, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	2,441,016.	2,441,016.		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	2/111/0101	2/441/0104		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members	-			
5	Compensation of current officers, directors,				
	trustees, and key employees	218,894.	175,770.	43,124.	
6	Compensation not included above, to disqualified		•		
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	764,631.	660,939.	103,692.	
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	28,065.	24,560.	3,505.	
9	Other employee benefits	56,293.	48,238.	8,055.	
10	Payroll taxes	78,619.	66,959.	11,660.	
11	Fees for services (non-employees)				
а	Management	6 705		6 505	
b	Legal	6,785.		6,785.	
С.	Accounting	45,988.	20 257	45,988.	<del></del>
	Lobbying	29,257.	29,257.		<del>.</del>
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	107 070	170 271	10 000	
g	Other	197,079.	178,271.	18,808.	
12	Advertising and promotion	59,564.	51,929.	7 625	
13	Office expenses	42,012.	35,781.	7,635. 6,231.	
14 15	Information technology Royalties	42,012.	33,701.	0,231.	
16	Occupancy	130,640.	111,265.	19,375.	
17	Travel	116,636.	102,269.	14,367.	
18	Payments of travel or entertainment expenses	110,030.	102,200.	14,307.	
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	155,993.	147,663.	8,330.	
20	Interest	233,333.	117,003.	0,350.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	9,368.	7,979.	1,389.	
23	Insurance	5,422.	2,870.	2,552.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A)				
а	amount, list line 24f expenses on Schedule O.)  BAD DEBT	46,648.		46,648.	
a b	DUES AND MEMBERSHIPS	26,406.	26,251.	155.	<del> </del>
C		20,400.	20,231.		
d					
e					
f	All other expenses				
25	Total functional expenses Add lines 1 through 24f	4,459,316.	4,111,017.	348,299.	0
26	Joint costs Check here Infollowing SOP	1,100,010.	2,221,02/0	323,233.	
	98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

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Form **990** (2010)

Form 990 (2010)
Part X Balance Sheet

Pa	rt X	Balance Sheet					
					(A) Beginning of year	-	(B) End of year
	1	Cash - non-interest-bearing			200.	1	200.
	2	Savings and temporary cash investments			913,769.	2	1,616,189.
	3	Pledges and grants receivable, net			622,068.	3	1,526,586.
	4	Accounts receivable, net		[	16,580.	4	20,456.
	5	Receivables from current and former officers, di	rectors	, trustees, key			
	ŀ	employees, and highest compensated employe	es Con	nplete Part II			
		of Schedule L				5	
	6	Receivables from other disqualified persons (as					
		4958(f)(1)), persons described in section 4958(c					
		employers and sponsoring organizations of sec					
<b>,</b> 0		employees' beneficiary organizations (see instru	ictions)			6	
Assets	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges		_	9,738.	9	12,578.
	10a	Land, buildings, and equipment cost or other					
		basis Complete Part VI of Schedule D	10a	62,029.			
	b	Less: accumulated depreciation	10b	47,971.	21,375.	10c	14,058.
	11	Investments - publicly traded securities		11			
	12	Investments - other securities See Part IV, line		12			
	13	Investments - program-related See Part IV, line		13			
	14	Intangible assets		14			
	15	Other assets See Part IV, line 11		15			
	16	Total assets. Add lines 1 through 15 (must equ	al line 3	34)	1,583,730.	16	3,190,067.
	17	Accounts payable and accrued expenses	394,399.	17	692,115.		
	18	Grants payable	-	42 201	18	65.045	
	19	Deferred revenue	-	43,371.	19	67,247.	
	20	Tax-exempt bond liabilities		}		20	
ies	21	Escrow or custodial account liability. Complete		T T		21	
Liabilities	22	Payables to current and former officers, directo					
Lia		highest compensated employees, and disqualif	iea pers	sons Complete Part II			
		of Schedule L				22	
	23	Secured mortgages and notes payable to unrela		· '		23	
	24	Unsecured notes and loans payable to unrelate Other liabilities. Complete Part X of Schedule D		parties		24	
	25 26	Total liabilities. Add lines 17 through 25			437,770.	25 26	759,362.
	20	Organizations that follow SFAS 117, check h	oro N	X and complete	437,770.	20	133,302.
Ø		lines 27 through 29, and lines 33 and 34.	ere P	and complete			
č	27	Unrestricted net assets			472,277.	27	637,654.
alar	28	Temporarily restricted net assets			673,683.	28	1,793,051.
Ä	29	Permanently restricted net assets		01370031	29	1,,55,051	
Š		Organizations that do not follow SFAS 117, c	ere 🕨 🔲 and				
ŗ.		complete lines 30 through 34.	nook n				
ţ	30	Capital stock or trust principal, or current funds				30	
Net Assets or Fund Balances	31	Paid-in or capital surplus, or land, building, or ed		nt fund		31	
ťΑ	32	Retained earnings, endowment, accumulated in		ľ		32	
ž	33	Total net assets or fund balances	,		1,145,960.	33	2,430,705.
	34	Total liabilities and net assets/fund balances			1,583,730.	34	3,190,067.
							Form <b>990</b> (2010)

Form **990** (2010)

$\overline{}$	1 990 (2010) THE CORPS NETWORK	52-14	80202	Pa	ge <b>12</b>
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	5,74	4.0	61.
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,45		
3	Revenue less expenses Subtract line 2 from line 1	3	1,28		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,14		
5	Other changes in net assets or fund balances (explain in Schedule O)	5			0.
6_	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	2,43	0,7	05.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
b	Were the organization's financial statements audited by an independent accountant?		_2b	Х	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th	e audıt,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	d on a			
	separate basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sii	ngle Audıt			
	Act and OMB Circular A-133?		3a	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	ired audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	Х	L
			Form	990 (	2010)

#### SCHEDULE: A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service **Public Charity Status and Public Support** 

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

➤ Attach to Form 990 or Form 990-EZ. ➤ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization Employer identification number 52-1480202 CORPS NETWORK Reason for Public Charity Status (All organizations must complete this part ) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 4 city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. b \_\_\_\_ Type II c \_\_\_\_ Type III - Functionally integrated By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? q A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, Yes the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s) h (iii) Type of (vi) Is the (iv) Is the organization (v) Did you notify the (vii) Amount of (i) Name of supported (ii) EIN organization in col. (i) organized in the U.S.? organization n col. (i) listed in your organization in col. organization support (described on lines 1-9 governing document? (i) of your support? above or IRC section (see instructions)) Yes No Yes Nο Yes No

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Form 990 or 990-EZ.

LHA For Paperwork Reduction Act Notice, see the Instructions for

Schedule A (Form 990 or 990-EZ) 2010

# (Form 990 or 990 EZ) 2010 THE CORPS NETWORK 52-1480202 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III)

Sec	tion A. Public Support						
	dar year (or fiscal year beginning in)	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
	Gifts, grants, contributions, and		` ` `	<b>\</b>		<b>,</b> -,	
	membership fees received. (Do not						
	include any "unusual grants.")	4674333.	5472196.	6818044.	4391789.	5461290.	26817652.
2	Tax revenues levied for the organ-						
	zation's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	4674333.	5472196.	6818044.	4391789.	5461290.	26817652.
5	The portion of total contributions			, ,			
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						2466533.
6	Public support. Subtract line 5 from line 4						24351119.
Sec	tion B. Total Support						
Calen	dar year (or fiscal year beginning in)	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	Amounts from line 4	4674333.	5472196.	6818044.	4391789.		26817652.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	17,201.	15,983.	2,580.	276.	1,941.	37,981.
9	Net income from unrelated business			• • • • • • • • • • • • • • • • • • •		•	1
	activities, whether or not the						
	business is regularly carried on						
10	Other income Do not include gain						
	or loss from the sale of capital						}
	assets (Explain in Part IV)	16,080.	2.				16,082.
11	Total support. Add lines 7 through 10						26871715.
	Gross receipts from related activities,	etc (see instruction	ons)			12 1	,090,185.
	First five years. If the Form 990 is for	•	-	d, fourth, or fifth ta	ax year as a sectio		
	organization, check this box and stop				•		ightharpoonup
Sec	tion C. Computation of Publ	ic Support Pe	rcentage				<u> </u>
14	Public support percentage for 2010 (I	ine 6, column (f) d	ivided by line 11, c	column (f))		14	90.62 %
15	Public support percentage from 2009	Schedule A, Part	II, line 14			15	94.35 %
16a	33 1/3% support test - 2010. If the o	rganization did not	t check the box or	line 13, and line 1	4 is 33 1/3% or m	ore, check this bo	ox and
	stop here. The organization qualifies	as a publicly supp	orted organization	1			$\triangleright \mathbf{X}$
b	33 1/3% support test - 2009. If the o	rganization did not	t check a box on li	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check th	nis box
	and stop here. The organization qual	ifies as a publicly s	supported organiza	ation			ightharpoons
17a	10% -facts-and-circumstances tes	t - 2010. If the orga	anization did not c	heck a box on line	13, 16a, or 16b, a	ind line 14 is 10%	or more,
;	and if the organization meets the "fac	ts-and-circumstan	ces" test, check th	nis box and stop h	ere. Explain in Pa	rt IV how the orga	nization
	meets the "facts-and-circumstances"			•	· ·	3-	▶□
	10% -facts-and-circumstances tes	-	•		-	7a, and line 15 is	10% or
	more, and if the organization meets th	-					
	organization meets the "facts-and-circ				•		
	Private foundation. If the organization		_		-		ns 🕨 🗔
							0 or 990-EZ) 2010

#### Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II)

A. Public Support							
ar (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009		(e) 2010	(f) Total
grants, contributions, and							
pership fees received (Do not							
le any "unusual grants.")			ļ			ļ	
receipts from admissions, nandise sold or services perd, or facilities furnished in ctivity that is related to the ization's tax-exempt purpose							
' ' '					<b>†</b>		
·							
				<del> </del>	<del>† -</del>		
•							
· · · · · · · · · · · · · · · · · · ·					1		
<u> </u>					+		
	1				1		
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<del></del>	(a) 2006	(b) 2007	(c) 2008	(d) 2009		(e) 2010	(f) Total
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ends, payments received on titles loans, rents, royalties acome from similar sources							
ted business taxable income							
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ines 10a and 10b							
icome from unrelated business ties not included in line 10b, ner or not the business is arly carried on							
rincome Do not include gain s from the sale of capital s (Explain in Part IV)							
Support (Add lines 9, 10c, 11, and 12)			<u> </u>				<u> </u>
<b>five years.</b> If the Form 990 is for	the organization's	s first, second, thii	rd, fourth, or fifth t	tax year as a section	on 50°	1(c)(3) organiz	ation,
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C. Computation of Publi	c Support Pe	rcentage					
support percentage for 2010 (li	ine 8, column (f) d	livided by line 13,	column (f))		15		%
support percentage from 2009	Schedule A, Part	III, line 15			16		%
D. Computation of Inves	stment Incom	e Percentage					
tment income percentage for 20	10 (line 10c, colur	mn (f) divided by li	ne 13, column (f))		17		%
			, , ,		18		%
•			on line 14, and lin	e 15 is more than		3%, and line 1	
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te roundation. It the organizatio	n dig not crieck a	DON OIT HITE 14, 18	a, or iso, check i				000 531 004
	grants, contributions, and grants, contributions, and grants, contributions, and grants, contributions, and grants, present fees received (Do not e any "unusual grants.")  Treceipts from admissions, andise sold or services perd, or facilities furnished in ctivity that is related to the ization's tax-exempt purpose in receipts from activities that that an unrelated trade or bushunder section 513 evenues levied for the organish benefit and either paid to benefit and either paid to ganization without charge.  Add lines 1 through 5 ents included on lines 1, 2, and gived from disqualified persons is included on lines 2 and 3 received the than disqualified persons is included on lines 2 and 3 received the than disqualified persons that the greater of \$5,000 or 1% of the on line 13 for the year mes 7a and 7b  Expoport (Subtractline 7c from line 6)  B. Total Support  Lar (or fiscal year beginning in)  Lar (or fiscal year	ar (or fiscal year beginning in) grants, contributions, and grants, contributions, and grants, contributions, and grants fees received (Do not e any "unusual grants.")  receipts from admissions, and is so grands and is sold or services perd, or facilities furnished in ctivity that is related to the location's tax-exempt purpose receipts from activities that of an unrelated trade or busunder section 513  prenues levied for the organish benefit and either paid to bended on its behalf alue of services or facilities hed by a governmental unit to ganization without charge  Add lines 1 through 5  Ints included on lines 1, 2, and size from disqualified persons is included on lines 2 and 3 received her than disqualified persons is included on lines 2 and 3 received her than disqualified persons is included on lines 2 and 7 b  support (Subtractline 7c from line 6)  B. Total Support  ar (or fiscal year beginning in)  c support (Subtractline 7c from line 6)  B. Total Support  ar (or fiscal year beginning in)  c support (Subtractline 7c from line 6)  B. Total Support  ar (or fiscal year beginning in)  c support (Subtractline 7c from line 6)  B. Total Support  ar (or fiscal year beginning in)  c support (Subtractline 7c from line 6)  B. Total Support  ar (or fiscal year beginning in)  c support (Subtractline 7c from line 6)  B. Total Support  ar (or fiscal year beginning in)  c support (Subtractline 7c from line 6)  B. Total Support  ar (or fiscal year beginning in)  c support to business is sold business sies not included in line 10b, tener or not the business is sold mines 11 taxes) from businesses end after June 30, 1975  nes 10a and 10b  come from unrelated business is not included in line 10b, tener or not the business is not included in line 10b, tener or not the business is not included in line 10b, tener or not the business is not included in line 10b, tener or not the business is not included in line 10b, tener or not included in line 10b, tener or not included in line 10b, tener or not included in line 10b, tener	ar (or fiscal year beginning in)   grants, contributions, and ership fees received (Do not e any "unusual grants.") receipts from admissions, and less sold or services perd, or facilities furnished in chird, or facilities for activities that at an unrelated trade or busunder section 513 wenues levied for the organish benefit and either paid to benefid and either paid to bene	ar (or fiscal year beginning in) prants, contributions, and serving fees received (Do not e any "unusual grants.")  receipts from admissions, and sees are controlled in the control of th	ar (or fiscal year beginning in)	ar (or fiscal year beginning in) ▶ (a) 2006 (b) 2007 (c) 2008 (d) 2009 grants, contributions, and prescribe flees received (Do not e any "unusual grants.") recepts from admissions, and disease and or services perd, or facilities furnished in circle yill yill yill yill yill yill yill yi	ar (or fiscal year beginning in)

#### SCHEDULE<sup>·</sup>C (Form 990 or 990-EZ)

## **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

2010

Open to Public Inspection

Department of the Treasury Internal Revenue Service ➤ Complete if the organization is described below. ➤ Attach to Form 990 or Form 990-EZ.

➤ See separate instructions.

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations. Complete Parts I-A and C below Do not complete Part I-B.
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B. Do not complete Part II-A

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), or Form 990-EZ, Part V, line 35a (Proxy Tax), then

Employer identification number   52 - 1480202	Employer identification number   52 - 1480202	• 8	Section 501(c)(4), (5), or (6) organizat	tions. Complete Part III	• ,,		,
Part I-A   Complete if the organization is exempt under section 501(c) or is a section 527 organization.  1 Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political expenditures 3 Volunteer hours    Part I-B   Complete if the organization is exempt under section 501(c)(3). 1 Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 4 Was a correction made?    Yes   Ni	Part I-A   Complete if the organization is exempt under section 501(c) or is a section 527 organization.  1					Empl	oyer identification number
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exempt function activities  3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b  4 Did the filing organization file Form 1120-POL for this year?  5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV  (a) Name  (b) Address  (c) EIN  (d) Amount paid from  (e) Amount of political	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b  Did the filing organization file Form 1120-POL for this year?  Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV  (a) Name  (b) Address  (c) EIN  (d) Amount paid from filing organization's funds. If none, enter -0-promptly and directly delivered to a separate political organization.	1	Enter the amount directly expended	by the filing organization for se	ection 527 exempt fund	ction activities > \$	
Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b  Did the filing organization file Form 1120-POL for this year?  Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV  (a) Name  (b) Address  (c) EIN  (d) Amount paid from  (e) Amount of political	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b  Did the filing organization file Form 1120-POL for this year?  Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV  (a) Name  (b) Address  (c) EIN  (d) Amount paid from filing organization's funds. If none, enter -0- promptly and directly delivered to a separate political organization.	2	Enter the amount of the filing organ	ization's funds contributed to o	ther organizations for s	section 527	
Ine 17b  4 Did the filing organization file Form 1120-POL for this year?  5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.  (a) Name  (b) Address  (c) EIN  (d) Amount paid from  (e) Amount of political	Inne 17b  4 Did the filing organization file Form 1120-POL for this year?  5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV  (a) Name  (b) Address  (c) EIN  (d) Amount paid from filing organization's funds. If none, enter -0-promptly and directly delivered to a separate political organization.		exempt function activities			▶\$	
Did the filing organization file Form 1120-POL for this year?  Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV  (a) Name  (b) Address  (c) EIN  (d) Amount paid from  (e) Amount of political	4 Did the filing organization file Form 1120-POL for this year?  5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV  (a) Name  (b) Address  (c) EIN  (d) Amount paid from filing organization's funds. If none, enter -0-promptly and directly delivered to a separate political organization.	3	Total exempt function expenditures	Add lines 1 and 2 Enter here	and on Form 1120-POI	L <b>,</b>	
5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV  (a) Name  (b) Address  (c) EIN  (d) Amount paid from  (e) Amount of political	5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV  (a) Name  (b) Address  (c) EIN  (d) Amount paid from filing organization's funds. If none, enter -0- promptly and directly delivered to a separate political organization.		line 17b			▶ \$	
made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV  (a) Name  (b) Address  (c) EIN  (d) Amount paid from  (e) Amount of political	made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV  (a) Name  (b) Address  (c) EIN  (d) Amount paid from filing organization's funds. If none, enter -0-promptly and directly delivered to a separate political organization.	4	Did the filing organization file Form	1120-POL for this year?			Yes No
contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV  (a) Name  (b) Address  (c) EIN  (d) Amount paid from  (e) Amount of political	contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV  (a) Name  (b) Address  (c) EIN  (d) Amount paid from filling organization's funds If none, enter -0- promptly and directly delivered to a separate political organization						
political action committee (PAC) If additional space is needed, provide information in Part IV  (a) Name (b) Address (c) EIN (d) Amount paid from (e) Amount of political	political action committee (PAC) If additional space is needed, provide information in Part IV  (a) Name  (b) Address  (c) EIN  (d) Amount paid from filing organization's funds If none, enter -0- promptly and directly delivered to a separate political organization						
(a) Name (b) Address (c) EIN (d) Amount paid from (e) Amount of political	(a) Name (b) Address (c) EIN (d) Amount paid from filing organization's funds If none, enter -0- promptly and directly delivered to a separate political organization		•			•	te segregated fund of a
	filing organization's contributions received and funds if none, enter -0-promptly and directly delivered to a separate political organization			T			( ) A
I I filing organization's I contributions received an	funds If none, enter -0- promptly and directly delivered to a separate political organization		(a) Name	(b) Address	(c) FIN	, , ,	
19 - 9	political organization					1	•
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Schedule C (Form 990 or 990-EZ) 2010

032041 02-02-11

Schedule C (Form 990 or 990 EZ) 2010	THE CORPS I	NETWORK	= <del></del>	52-1	480202 Page 2			
Part II-A Complete if the orga		npt under sectior	1 501(c)(3) and file	ed Form 5768				
	ion belongs to an affili	ated group	<del></del>					
	=	d "limited control" pro	visions apply					
	s on Lobbying Expen itures" means amou	nditures nts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals			
1a Total lobbying expenditures to influ	ence public opinion (g	grass roots lobbying)		1,076.				
<b>b</b> Total lobbying expenditures to influ	ence a legislative bod	y (direct lobbying)		44,256.				
c Total lobbying expenditures (add lir	nes 1a and 1b)			45,332.				
d Other exempt purpose expenditure	s			4,413,984.				
e Total exempt purpose expenditures	s (add lines 1c and 1d)	)		4,459,316.				
f Lobbying nontaxable amount Ente	r the amount from the	following table in both	columns	372,966.				
If the amount on line 1e, column (a) or	(b) is: The lobb	oying nontaxable amo	ount is:					
Not over \$500,000		he amount on line 1e						
Over \$500,000 but not over \$1,000		O plus 15% of the exce	- "					
Over \$1,000,000 but not over \$1,50		0 plus 10% of the exce						
Over \$1,500,000 but not over \$17,0		O plus 5% of the exces	ss over \$1,500,000					
Over \$17,000,000		000						
g Grassroots nontaxable amount (en	ter 25% of line 1f)			93,242.				
h Subtract line 1g from line 1a If zero	or less, enter -0-			0.				
i Subtract line 1f from line 1c If zero		0.						
j If there is an amount other than zer								
reporting section 4911 tax for this	*		<del></del>		Yes No			
4-Year Averaging Period Under Section 501(h)  (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)								
Lobbying Expenditures During 4-Year Averaging Period								
Calendar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) Total			
2a Lobbying nontaxable amount	410,667.	517,389.	367, <u>3</u> 28.	372,966.	1,668,350.			
b Lobbying ceiling amount								
(150% of line 2a, column(e))					2,502,525.			
c Total lobbying expenditures	35,343.	38,495.	36,532.	45,332.	155,702.			
d Grassroots nontaxable amount	102,667.	129,347.	91,832.	93,242.	417,088.			
e Grassroots ceiling amount (150% of line 2d, column (e))					625,632.			

Schedule C (Form 990 or 990-EZ) 2010

830.

1,801.

f Grassroots lobbying expenditures

# Schedule C (Form 990 or 990 EZ) 2010 THE CORPS NETWORK 52-148020 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

		(8	1)	(b	)
		Yes	No	Amo	unt
1	During the year, did the filing organization attempt to influence foreign, national, state or				
	local legislation, including any attempt to influence public opinion on a legislative matter				
	or referendum, through the use of:				
а	Volunteers?				
þ	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
	Media advertisements?				
	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?	<u> </u>			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	<u> </u>		<del></del> -	
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
į	Other activities? If "Yes," describe in Part IV				
Ĵ	Total Add lines 1c through 1i	-			
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912  If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
	t III-A   Complete if the organization is exempt under section 501(c)(4), secti	on 501(c)	(5). or se	ction	
	501(c)(6).	o oo .(o,	(0), 0. 00		
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?		3		
1	501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Pa"Yes."  Dues, assessments and similar amounts from members		ne 3 is a	nswered	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	cal	·		
	expenses for which the section 527(f) tax was paid).				
а	Current year		2a		
b	Carryover from last year		2b		
С	Total		2c		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3_		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex	cess			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	political			
	expenditure next year?				
5	Taxable amount of lobbying and political expenditures (see instructions)		5		
	t IV Supplemental Information				
	plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5, a ny additional information	nd Part II-B,	line 11 Also	o, complete	this part
					<del></del>

Schedule C (Form 990 or 990-EZ) 2010

### SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Financial Statements**

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

➤ Attach to Form 990. ➤ See separate instructions.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number

	THE CORPS NETWORK		52-1480202		
Pa	t I Organizations Maintaining Donor Advis	ed Funds or Other Similar Funds	or Accounts. Complete if the		
	organization answered "Yes" to Form 990, Part IV, lir	ne 6.			
	·	(a) Donor advised funds	(b) Funds and other accounts		
1	Total number at end of year				
2	Aggregate contributions to (during year)				
3	Aggregate grants from (during year)				
4	Aggregate value at end of year				
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advise	ed funds		
_	are the organization's property, subject to the organization's		Yes No		
6	Did the organization inform all grantees, donors, and donor	=			
•	for charitable purposes and not for the benefit of the donor		·		
	impermissible private benefit?	or donor advisor, or for any other purpose t			
Pa		rappization answered "Vee" to Form 000. D.	Yes No		
1			art IV, line 7		
'	Purpose(s) of conservation easements held by the organiza				
	Preservation of land for public use (e.g., recreation or	·	torically important land area		
	Protection of natural habitat	Preservation of a certi	fied historic structure		
_	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a qual	ified conservation contribution in the form of	of a conservation easement on the last		
	day of the tax year.				
			Held at the End of the Tax Year		
а	Total number of conservation easements		2a		
b	Total acreage restricted by conservation easements		2b		
С	Number of conservation easements on a certified historic st	ructure included in (a)	_2c		
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic structu	ıre		
	listed in the National Register		2d		
3	Number of conservation easements modified, transferred, re-	eleased, extinguished, or terminated by the	organization during the tax		
	year ▶				
4	Number of states where property subject to conservation ea	asement is located >			
5	Does the organization have a written policy regarding the pe	eriodic monitoring, inspection, handling of			
	violations, and enforcement of the conservation easements	it holds?	Yes No		
6	Staff and volunteer hours devoted to monitoring, inspecting	, and enforcing conservation easements du			
7	Amount of expenses incurred in monitoring, inspecting, and				
8	Does each conservation easement reported on line 2(d) about				
	and section 170(h)(4)(B)(ii)?	, , , , , , , , , , , , , , , , , , , ,	Yes No		
9	In Part XIV, describe how the organization reports conserva	tion easements in its revenue and expense			
	include, if applicable, the text of the footnote to the organization				
	conservation easements				
Pa	t III Organizations Maintaining Collections	of Art. Historical Treasures, or Ot	ther Similar Assets.		
Complete if the organization answered "Yes" to Form 990, Part IV, line 8					
			ent and halance sheet works of art		
1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV,					
	the text of the footnote to its financial statements that desc		iso of public service, provide, in Fait XIV,		
b	If the organization elected, as permitted under SFAS 116 (A		and halance shoot works of art, historical		
	treasures, or other similar assets held for public exhibition, e				
		education, or research in furtherance of pub	olic service, provide the following amounts		
	relating to these items				
	(i) Revenues included in Form 990, Part VIII, line 1		<b>S S S S S S S S S S</b>		
_	(ii) Assets included in Form 990, Part X		<b>&gt;</b> \$		
2	If the organization received or held works of art, historical tr		gain, provide		
	the following amounts required to be reported under SFAS	116 (ASC 958) relating to these items			
а	Revenues included in Form 990, Part VIII, line 1		<b>&gt;</b> \$		
b	Assets included in Form 990, Part X		► \$ ► \$		

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Schedule D (Form 990) 2010

Part III   Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)			PS NETWORK						80202		ge <b>2</b>
Check all that apply :	Pai			<del></del>							
a Public exhabition   d	3	Using the organization's acquisition, accessi	on, and other record	ls, check any of the	following that	t are a s	significant	use of its	collection	ı items	3
b Scholarly research c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV. 5 During the year, did the organization's collections and explain how they further the organization's exempt purpose in Part XIV. 5 During the year, did the organization's collection?   Yes   No   Part V  Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.  1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21.  b If "Yes, "Explain the arrangement in Part XIV and complete the following table  c Beginning balance  d Additions during the year 1 Ending balance 2a Did the organization during the year 1 Ending balance 2a Did the organization clude an amount on Form 990, Part X, line 21?  b If "Yes, "Splain the arrangement in Part XIV  Part V  Endowment Funds, Complete if the organization answered "Yes" to Form 990, Part IV, line 10.  1a Beginning of year balance  b Contributions  c Net anvestment earnings, gains, and losses d Grants or scholarships  c Other expenditures for facilities and programs a Board designated or quasi-endowment   96  De Promoder the estimated percentage of the year end balance held as a Board designated or quasi-endowment   96  De Torm endowment   96  Description of investment  (a) Cost or other basis (investment)  Description of investment  (a) Cost or other basis (investment)  Description of investment  (b) Document  (c) Accumulated  (d) Book value  deprivation of investment  (d) Book value  description of investment  (e) Cheer produces of the granization's endowment funds  Description of investment  (e) Cost or other basis (investment)  Description of investment  (e) Description of investment  (e) Descrip											
c	а	<del></del>	d	Loan or exc	change progra	ams					
4. Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.  5. During the year, did the organization solicit or receive donations of art, historical treasures, or other smilar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  1. Part IV   Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X. line 21.  1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X. line 21.  1b If "Yes," explain the arrangement in Part XIV and complete the following table.  1c Beginning balance  2 Bodthe organization include an amount on Form 990, Part X, line 21?  2 Bodthe organization include an amount on Form 990, Part X, line 21?  2 Bodthe organization include an amount on Form 990, Part X, line 21?  2 Bodthe organization include an amount on Form 990, Part X, line 21?  3 Beginning of year balance  4 Contributions  4 Contributions  5 Contributions  6 Cantifution organization includes an amount on Form 990, Part X, line 21?  6 Contributions  6 Not in "Yes," explain the arrangement in Part XIV  1a Bodrinent Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.  (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years b	b	Scholarly research	е	Other	_						
Source   Description   Source   Description   Source   Description	С	<del>-</del>									
To be sold to raise funds rather than to be maintained as pair of the organization's collection?    Part IV   Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.    1a   Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21.    b   If "Yes," explain the arrangement in Part XIV and complete the following table	4							se in Par	t XIV.		
Eart IV   Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.  1a Is the organization an agent, frustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?    Ves   No   No   If "Yes," explain the arrangement in Part XIV and complete the following table     Compared to the organization of the part XIV and complete the following table     Compared to the organization include an amount on Form 990, Part X, line 21?   Yes   No   No   If "Yes," explain the arrangement in Part XIV   Yes   No   No   If "Yes," explain the arrangement in Part XIV   Yes   No   No   If "Yes," explain the arrangement in Part XIV   Yes   No   No   No   No   No   No   No   N	5					er sımıla	ır assets	_	_		
reported an amount on Form 990, Part X, line 21.  Is its the organization an agent, trustee, custodan or other intermediary for contributions or other assets not included on Form 990, Part XIV and complete the following table  C. Beginning balance d. Additions during the year c. Beginning balance d. Additions during the year e. Distributions e. Distributions e. Distributions e. Not investment earnings, gains, and losses d. Grants or scholarships e. Other expenditures for facilities and programs f. Administrative expenses g. End of year balance e. Other expenditures for facilities and programs f. Administrative expenses g. End of year balance e. Other expenditures for facilities and programs f. Administrative expenses g. End of year balance e. Other expenditures for facilities and programs f. Administrative expenses g. End of year balance e. Perrowle the estimated percentage of the year and balance held as a Board designated or quasi-endowment local programs.  Is a Board designated or quasi-endowment local programs.  Salati limit designated or ganizations (ii) related organizations (iii) related organizations (iii) related organizations (iv) unrelated organ	_									<u> </u>	No
1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?	Pai	t IV Escrow and Custodial Arran	gements. Comple	ete if the organization	on answered '	"Yes" to	Form 990	, Part IV,	line 9, or		
No   Form 990, Part X?		reported an amount on Form 990, Pai	t X, line 21.								
b If "Yes," explain the arrangement in Part XIV and complete the following table  c Beginning balance d Additions during the year 1 Ending balance 2a Dot the organization include an amount on Form 990, Part X, line 21?  b If "Yes," explain the arrangement in Part XIV    Part V   Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.    Table	ta		an or other intermed	liary for contribution	ns or other as	sets no	t ıncluded	_	_		,
Amount   1c		·						L_	_ Yes	L	No
C   Begin-ing balance   1d   1d   1d   1d   1d   1d   1d   1	b	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowing table							
d									Amount	:	
Part							1c				
1	d	Additions during the year		•			1d	···			
Describe or Part XIV the reganization include an amount on Form 990, Part X, line 21?    Yes   No	е	Distributions during the year					1e		<del></del>		
Description of investment   Part XIV   Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.		_		•			1f				
Part V   Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.   C   Nei   I I I I I I I I I I I I I I I I I I		_	orm 990, Part X, line	21?					_ Yes	L.	No
(a) Current year   (b) Prior year   (c) Two years back   (d) Three years back   (e) Four years back   (d) Three			<del></del>								
1a Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as a Board designated or quasi-endowment ▶	Pai	t V Endowment Funds. Complete	f the organization an	swered "Yes" to Fo	orm 990, Part	IV, line	10.		r		
b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as a Board designated or quasi-endowment \( \)			(a) Current year	(b) Prior year	(c) Two year	s back	(d) Three y	ears back	(e) Four	years l	oack_
c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as a Board designated or quasi-endowment ▶	1a	Beginning of year balance									
d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as a Board designated or quasi-endowment  % b Permanent endowment  % c Term endowment  funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations (iii) related organizations b if "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIV the intended uses of the organization's endowment funds  Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10  Description of investment (a) Cost or other basis (investment) basis (other) (b) Cost or other depreciation (c) Accumulated depreciation  1a Land b Buildings c Leasehold improvements d Equipment 40,682. 26,624. 14,058. e Other	b	Contributions									
e Other expenditures for facilities and programs  f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as a Board designated or quasi-endowment   % b Permanent endowment   % c Term endowment   % 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations (ii) related organizations b if "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIV the intended uses of the organization's endowment funds  Description of investment    Description of investment   (a) Cost or other basis (investment)   (b) Cost or other depreciation   (c) Accumulated depreciation   (d) Book value   (d) Book value	С	Net investment earnings, gains, and losses									
and programs  f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as a Board designated or quasi-endowment ▶	d	Grants or scholarships									
g End of year balance  2 Provide the estimated percentage of the year end balance held as a Board designated or quasi-endowment ▶	е	Other expenditures for facilities									
Provide the estimated percentage of the year end balance held as Board designated or quasi-endowment ▶		and programs									
Provide the estimated percentage of the year end balance held as  a Board designated or quasi-endowment ▶	f	Administrative expenses									
Board designated or quasi-endowment	g	End of year balance							<u> </u>		
b Permanent endowment	2		r end balance held a	ıs							
Term endowment ▶	а		<del></del>	_%							
Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations (ii) related organizations (ii) related organizations (ii) related organizations (iii) related organizations (iv) the intended uses of the organization's endowment funds    A Describe in Part XIV the intended uses of the organization's endowment funds   A Describe in Part XIV the intended uses of the organization's endowment funds   A Describe in Part XIV the intended uses of the organization's endowment funds   A Describe in Part XIV the intended uses of the organization's endowment funds   A Describe in Part XIV the intended uses of the organization's endowment funds   A Describe in Part XIV the intended uses of the organization's endowment funds   A Describe in Part XIV the intended uses of the organization's endowment funds   A Describe in Part XIV the intended uses of the organization   A Describe in Part XIV the intended uses of the organization   A Describe in Part XIV the intended uses of the organization   A Describe in Part XIV the intended uses of the organization   A Describe in Part XIV the intended uses of the organization   A Describe in Part XIV the intended uses of the organization   A Describe in Part XIV the intended uses of the organization   A Describe in Part XIV the intended uses of the organization   A Describe in Part XIV the intended uses of the organization   A Describe in Part XIV the intended uses of the organization   A Describe in Part XIV the intended uses of the organization   A Describe in Part XIV the intended uses of the organization   A Describe in Part XIV the intended uses of the organization   A Describe in Part XIV the intended uses of the organization   A Describe in Part XIV the intended uses of the organization   A Describe in Part XIV the intended uses of the organization   A Describe in Part XIV the intended uses of the organization   A Describe in Part XIV the intended uses of the organization   A Describe in Part	b	Permanent endowment	%								
Signature   Sign	С		· <del>-</del>								
(i) unrelated organizations (ii) related organizations  b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIV the intended uses of the organization's endowment funds  Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10  Description of investment (a) Cost or other basis (other) (b) Cost or other depreciation  1a Land b Buildings c Leasehold improvements c Leasehold improvements d Equipment d Equipment 40,682. 26,624. 14,058. e Other	3а										
(ii) related organizations  b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIV the intended uses of the organization's endowment funds  Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10  Description of investment  (a) Cost or other basis (investment)  (b) Cost or other basis (other)  (c) Accumulated depreciation  (d) Book value  (d) Book value  b Buildings  c Leasehold improvements  21,347. 21,347. 0.  d Equipment  e Other		-								Yes	No
b if "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIV the intended uses of the organization's endowment funds  Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10  Description of investment (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation  1a Land  b Buildings  c Leasehold improvements  d Equipment  e Other		(i) unrelated organizations							3a(i)		
Part VI		(ii) related organizations 3a(iii)									
Part VI       Land, Buildings, and Equipment. See Form 990, Part X, Inne 10         Description of investment       (a) Cost or other basis (investment)       (b) Cost or other basis (other)       (c) Accumulated depreciation         1a Land       b Buildings       2         c Leasehold improvements       21,347.       21,347.       0.         d Equipment       40,682.       26,624.       14,058.         e Other       1	b								3b		
Description of investment  (a) Cost or other basis (investment)  (b) Cost or other basis (other)  (c) Accumulated depreciation  (d) Book value  (d) Book value  21,347.  (e) Accumulated depreciation  (f) Book value  21,347.  (g) Accumulated depreciation  (h) Cost or other basis (other)  (h) Cost or other basis (other)  21,347.  21,347.  21,347.  21,347.  21,347.  21,347.  21,347.  21,347.  21,347.  21,347.  21,347.	4										
basis (investment)         basis (other)         depreciation           1a Land             b Buildings             c Leasehold improvements             d Equipment             e Other	Pai		ent. See Form 990	), Part X, line 10							
1a Land		Description of investment	1	, ,	I				(d) Bool	k value	<del>)</del>
b Buildings c Leasehold improvements d Equipment e Other  21,347. 21,347. 0. 40,682. 26,624. 14,058.			basis (investr	nent) basis	(other)	d€	epreciation				
c Leasehold improvements       21,347.       21,347.       0.         d Equipment       40,682.       26,624.       14,058.         e Other       14,058.											
d Equipment 40,682. 26,624. 14,058. e Other	b	v						<u></u>			
e Other	С	Leasehold improvements									
<del></del>		• •			10,682.		26,6	24.	1	4,0	<u>58.</u>
	ее	Other									

Schedule D (Form 990) 2010

Total. (Column (b) must equal Form 990, Part X, col (B) line 25)

FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under

FIN 48 (ASC 740)

032053

12-20-10

Schedule D (Form 990) 2010

Sche	dule D (Form 990) 2010 THE CORPS NETWORK		_			480202	Page <b>4</b>
Par	t XI Reconciliation of Change in Net Assets from Form 990 to	<b>Audite</b>	ed Financ	cial State	ment	S	
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1	_	5,744	.061.
2	Total expenses (Form 990, Part IX, column (A), line 25)			2		4,459	
3	Excess or (deficit) for the year. Subtract line 2 from line 1			3		1,284	
4	Net unrealized gains (losses) on investments		•	4			
5	Donated services and use of facilities			5			
	Investment expenses			6			
6	·					<del> </del>	
7	Prior period adjustments			7			
8	Other (Describe in Part XIV)			8			
9	Total adjustments (net) Add lines 4 through 8			9		1 204	0.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and		Ala Davisa	10	- A	1,284	, /45.
Par	t XII Reconciliation of Revenue per Audited Financial Stateme	nts wi	tn Rever	iue per H	eturn		0.54
1	Total revenue, gains, and other support per audited financial statements				1	5,744	,061.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12						
а	Net unrealized gains on investments	2a			J F		
b	Donated services and use of facilities	2b			] [		
С	Recoveries of prior year grants	2c					
ď	Other (Describe in Part XIV)	2d					
е	Add lines 2a through 2d				2e		0.
3	Subtract line 2e from line 1				3	5,744	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:						
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			1		
b	Other (Describe in Part XIV )	4b			1		
-	Add lines 4a and 4b	40		<del></del>	1 4- 1		٥
c					4c 5	5,744	0.
Dai	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)  T XIII Reconciliation of Expenses per Audited Financial Stateme	onte M	lith Eyno	nege nor			,001.
		ento vi	itti Expe	naca per	$\overline{}$		216
1	Total expenses and losses per audited financial statements				1	4,459	, 310.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1					
а	Donated services and use of facilities	_2a	<del></del>	<del> ,,</del>	4 [		
b	Prior year adjustments	2b			1		
С	Other losses	2c			] [		
d	Other (Describe in Part XIV)	2d			]		
е	Add lines 2a through 2d				2e	·	0.
3	Subtract line 2e from line 1				3	4,459	<u>,316.</u>
4	Amounts included on Form 990, Part IX, line 25, but not on line 1						
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a					
b	Other (Describe in Part XIV)	4b			1		
C	Add lines 4a and 4b				4c		0.
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)				5	4,459	
	t XIV Supplemental Information			<del></del> -		4,455	, , , , , ,
		Lipos 1	o and 4. Do	rt IV Jungo 1	b and 2	th Port V line	4 Part
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information							
PART X, LINE 2: EFFECTIVE OCTOBER 1, 2009, THE CORPS NETWORK ADOPTED							
PART A, LINE 2: EFFECTIVE OCTOBER 1, 2009, THE CORPS NETWORK ADOPTED							
THE AUTHORITATIVE CUITDANCE TO ACCOUNTANCE FOR INCREDITATION IN INCOME TAYED							
THE AUTHORITATIVE GUIDANCE TO ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES							
INCLUDED IN THE ACCOUNTING STANDARDS RELATED TO INCOME TAXES. THIS							
THE PARTY OF THE P							
ST	ANDARD PROVIDES CONSISTENT GUIDANCE FOR THE	E AC	COUNTI	NG FOR	UNC	CERTAIN'	ΓY
		_					
IN	INCOME TAXES RECOGNIZED IN AN ENTITY'S FIN	NANC:	IAL ST	ATEMEN	ITS A	AND	
PRE	SCRIBES A THRESHOLD OF "MORE LIKELY THAN 1	"ТОИ	FOR R	ECOGNI	TOIT	J AND	
	BONIEDO II IMMONODO OI NONO BINDEI IMM		1011 1	1000111		, IIII	<del></del>
חקים	RECOGNITION OF TAX POSITIONS TAKEN OR EXPE	רשיים	ጥ/ घः	ጥልሆው	TNT	ል ጥልሄ	
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Dina		ידית מזו	ONT OF	TIMIO DO P	13 T17	mхv	
KE'	<u> TURN. THE CORPS NETWORK PERFORMED AN EVALU</u>	OA.I.T	ON OF	UNCER'I			
032054	4				Sched	ule D (Form 9	90) 2010
12-20-	10						

032035 12-20-10

SCHEDULE I (Form 990) Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

2010
ODEN to Public Inspection

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

Schedule I (Form 990) (2010) Employer identification number Š 52-1480202 CORPS RESPOND; BUREAU OF Q. CORPS RESPOND; BUREAU OF CORPS RESPOND; BUREAU RECOVERY CORPS; CIVIC (h) Purpose of grant or assistance JUSTICE CORPS; CORPS X Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any CORPS RESPOND CORPS RESPOND RECLAMATION RECLAMATION RECLAMATION RESPOND recipient that received more than \$5,000 Check this box if no one recipient received more than \$5,000 Part II can be duplicated if additional space is needed ame and address of organization (below if applicable cash grant assistance or government assistance or government assistance assistance assistance (control or cash assistance assistance) Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection o 0 o Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States 44,346 26 353 23,005 72,127 216,882 23,097 COCONINO COUNTY, AZ LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 16-1596462 501(C)(3) Enter total number of section 501(c)(3) and government organizations CORPS NETWORK 86-6000044 93-0818160 84-1450808 94-2831592 34-0975934 General Information on Grants and Assistance criteria used to award the grants or assistance? Enter total number of other organizations 1 (a) Name and address of organization COCONINO RURAL ENVIRONMENT CORPS 701 CAMINO DEL RIO, SUITE 101 SOUTHWEST CONSERVATION CORPS CONSERVATION CORPS NORTH BAY WESTERN NEW YORK AMERICORPS THE 5410 E. COMMERCE AVENUE NORTHWEST YOUTH CORPS SAN RAFAEL, CA 94901 FLAGSTAFF, AZ 86004 Name of the organization WSOS QUILTER CORPS 2188 SENECA STREET FREMONT, OH 43420 DURANGO, CO 81301 BUFFALO, NY 14210 EUGENE OR 97403 2621 AUGUSTA ST. 27 LARKSPUR ST. P.O. BOX 590 Part I Part II Q

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Schedule I (Form 990) THE CORPS NETWORK  Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II	CORPS NETWORK	vernments and Organ	nizations in the Ur	nted States (Sche	dule I (Form 990), Par		52-1480202 Page 1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HEART OF OREGON CORPS P.O. BOX 279 BEND, OR 97709	93-1303879	501(C)(3)	259,939,	0			CIVIC JUSTICE CORPS; CLEAN ENERGY SERVICE CORPS
NOISETTE FOUNDATION 1360 TRUXTUN AVE, SUITE 200 NORTH CHARLESTON, SC 29405	56-2415954	501(C)(3)	7,808,	0			DOL
EARTH CONSERVATION CORPS 2000 HALF STREET, SW WASHINGTON, DC 20024	52-1683270	501(C)(3)	9,983,	0			DOL; PLANTERS-DC
AMERICAN YOUTH WORKS 1901 E. BEN WHITE BLVD AUSTIN, TX 78741	74-2197942	501(C)(3)	213,107.	0			RECOVERY CORPS; BUREAU OF RECLAMATION; CLEAN ENERGY SERVICE CORPS
LIMITLESS VISTAS, INC. 1215 PRYTANIA STREET, SUITE 370 NEW ORLEANS, LA 70130	75-3213594	501(C)(3)	246,162.	0			CLEAN ENERGY SERVICE CORPS, PLANTERS
EARTHWORKS 1413 SECOND ST #4 SANTA FE, NM 87505	85-0425517	501(C)(3)	41,727.	0			CLEAN ENERGY SERVICE
CIVICWORKS 2701 ST. LO DR. BALTIMORE, MD 21213	52-1925614	501(C)(3)	161,310,	0.			CLEAN ENERGY SERVICE CORPS
THE PLACE PO BOX 509 20 E, MAIN ST. NORWICH, NY	16-1277226	501(C)(3)	61,874,	0			CLEAN ENERGY SERVICE CORPS
SUSTAINABILITY INSTITUTE 113 CALHOUN ST. CHARLESTON, SC 29401 LHA	58-2474104	501(C)(3)	118,260,	0			CLEAN ENERGY SERVICE CORPS Schedule I (Form 990)

Schedule I (Form 990) THE CORPS NETWORK Part II   Continuation of Grants and Other Assistance to Governments an	CORPS NETWORK	vernments and Organ	izations in the Ur	nited States (Sche	d Organizations in the United States (Schedule I (Form 990), Part II)		52-1480202 Page 1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YOUTH CONSERVATION CORPS 1020 W. GREENWOOD WAUKEGAN , IL 60087	36-3993578	501(C)(3)	155,000,	*0			CLEAN ENERGY SERVICE CORPS
THE WORK GROUP 3720 MARLTON PIKE PENNSAUKEN, NJ 08110	22-2718636	501(C)(3)	8,944,	0			DOL
ARC OF GREATER NEW ORLEANS PO BOX 52444 NEW ORLEANS, LA 70152	72-0456903	501(C)(3)	47,933.	0.			PLANTERS
ENERGY CONVERSION RESEARCH VENTURES, INC - 2300 N ST, NW #5308 - WASHINGTON, DC 20037	27-3910447		76,815,	0			PLANTERS-DC
WASHINGTON PARKS & PEOPLE 2437 15TH ST, NW WASHINGTON, DC 20009	52-1681110	501(C)(3)	10,000.	0		-	PLANTERS-DC
GREEN CITY CORPS 150 COURT ST. #2 BROOKLYN NY 11201	80-0428040	501(C)(3)	259,076,	0			CLEAN ENERGY SERVICE CORPS; PLANTERS-NY
CALIFORNIA CONSERVATION CORPS 1719 24TH ST SACRAMENTO, CA 95816	68-0298653	STATE OF CALIFOR	347,480.	0			BUREAU OF RECLAMATION
LHA		, , , , , , , , , , , , , , , , , , ,					Schedule I (Form 990)

52-1480202 Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed THE CORPS NETWORK Schedule I (Form 990) (2010) Part III

Page 2

(f) Description of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) FINANCIAL AND PROGRAMMATIC DATA SUBMITTED ON A QUARTERLY BASIS TO DETERMINE Part IV | Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information ONE-ON-ONE CONFERENCE CALLS SCHEDULED QUARTERLY AND ON AN AS-NEEDED BASIS LINE 2: IN ORDER TO EFFECTIVELY MONITOR ITS SUBSITES THE CORPS NETWORK REVIEWS THE IF THE PROJECT GOALS AND DELIVERABLES ARE BEING ACHIEVED IN A TIMELY ALL SUBSITES PROVIDE STATUS REPORTS DURING (d) Amount of non-cash assistance (c) Amount of cash grant (b) Number of recipients PARTICIPATING IN GRANT FUNDED PROJECTS, (a) Type of grant or assistance ADDITIONALLY, PART SCHEDULE I, MANNER.

#### SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

# Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

2010
Open to Public Inspection

Name of the organization

THE CORPS NETWORK

Employer identification number 52-1480202

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
THE CORPS NETWORK IS THE LEADER OF THE NATIONAL CORPS COMMUNITY
PROMOTING GROWTH, QUALITY, AND SUSTAINABILITY OF CORPS.
FORM 990, PART VI, SECTION A, LINE 4: THE BYLAWS CHANGED TO REDEFINE THE
COMPOSITION AND RESPONSIBILITIES OF THE BOARD OF DIRECTORS AND THE
ESTABLISHMENT OF THE CORPS COUNCIL.
FORM 990, PART VI, SECTION A, LINE 6: THE CORPS NETWORK SHALL HAVE FOUR
CATEGORIES OF MEMBERS AS FOLLOWS:
SECTION 1. SERVICE AND CONSERVATION CORPS MEMBERS. ANY UNIT OF
GOVERNMENT OR ANY PRIVATE OR QUASI-PUBLIC, NOT-FOR-PROFIT ORGANIZATION
OPERATING A SERVICE OR CONSERVATION CORPS MAY BECOME A SERVICE AND
CONSERVATION CORPS MEMBER OF THE CORPS NETWORK BY PAYING THE ANNUAL DUES
ESTABLISHED BY THE BOARD OF DIRECTORS IN CONSULTATION WITH THE CORPS
COUNCIL FOR SERVICE AND CONSERVATION CORPS MEMBERS. A SERVICE OR
CONSERVATION CORPS IS DEFINED AS A GOVERNMENT UNIT OR PROGRAM, OR A PRIVATE
NOT-FOR-PROFIT ORGANIZATION OR A PROGRAM OF SUCH ORGANIZATION WHOSE MAIN
PURPOSE IS TO OPERATE AND MANAGE A PROGRAM THAT:
A) IS ESTABLISHED BY STATUTE, ARTICLES OF INCORPORATION, EXECUTIVE ORDER,
OR OTHER DULY AUTHORIZED ACTION BY A GOVERNMENTAL UNIT OR INCORPORATED
NOT-FOR-PROFIT ORGANIZATION; AND

B) EMPLOYS OR OTHERWISE FORMALLY ENGAGES PARTICIPANTS IN STRUCTURED

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 032211 01-24-11

Schedule O (Form 990 or 990-EZ) (2010)

Name of the organization **Employer identification number** 52-1480202 THE CORPS NETWORK ACTIVITIES THAT SERVE TO MATERIALLY IMPROVE THE NATURAL ENVIRONMENT OR THE HUMAN CONDITION; AND C) DEVELOPS THE SKILLS AND KNOWLEDGE OF PARTICIPANTS ENROLLED IN THE PROGRAM; AND D) COMPENSATES AND/OR REIMBURSES PARTICIPANTS MONETARILY WHILE ENGAGED IN SERVICE ACTIVITIES. IN ADDITION TO ITS OWN MEMBERSHIP, A CORPS ENTITY WHICH IS OTHERWISE ELIGIBLE AND APPROVED FOR SERVICE AND CONSERVATION CORPS MEMBERSHIP MAY ALSO HAVE MORE THAN ONE SERVICE AND CONSERVATION CORPS MEMBERSHIP TO THE EXTENT THAT INDIVIDUAL SUBUNITS OF THE CORPS ENTITY HAVE INDEPENDENT FUNCTIONAL AUTHORITY WITHIN SPECIFIC GEOGRAPHICAL AREAS SERVED BY THAT CORPS ENTITY. TO BE ELIGIBLE UNDER THIS PROVISION EACH SUBUNIT OF THE CORPS ENTITY MUST HAVE SUBSTANTIAL INDEPENDENT SPENDING AUTHORITY OVER SUBCATEGORIES OF THE OVERALL BUDGET OF THE CORPS ENTITY AND OTHERWISE MEET THE CRITERIA SET FORTH IN THIS SECTION 1. THE CHIEF EXECUTIVE, OR SENIOR GOVERNMENTAL OFFICIAL, OF THE CORPS ENTITY MUST SPECIFY IN WRITING THE NUMBER OF CORPS SUBUNITS MEETING THESE MEMBERSHIP CRITERIA AND PROVIDE APPROPRIATE EVIDENCE OF ELIGIBILITY. THE CHIEF EXECUTIVE , OR SENIOR GOVERNMENTAL OFFICIAL, OF THE CORPS ENTITY SHALL HAVE THE SOLE AUTHORITY TO DESIGNATE WHETHER THE THE SUBUNITS OF THE CORPS ENTITY SHALL APPLY FOR MEMBERSHIPS OR WHETHER ONE MEMBERSHIP WILL REPRESENT THE TOTAL CORPS ENTITY AND ALL THE ELIGIBLE SUBUNITS OF THE CORPS ENTITY.

Schedule O (Form 990 or 990 EZ) (2010) Page 2 Name of the organization **Employer identification number** THE CORPS NETWORK 52-1480202 ALL SUBUNITS OF A CORPS ENTITY APPROVED FOR MEMBERSHIP BY THE BOARD OF DIRECTORS OF THE CORPS NETWORK WILL PAY THE MINIMUM SERVICE AND CONSERVATION CORPS MEMBER DUES AMOUNT SO LONG AS THE OVERALL CORPS ENTITY HAS PAID ONE SERVICE AND CONSERVATION CORPS MEMBER DUES AMOUNT BASED UPON THE OVERALL CORPS BUDGET. IF AN OVERARCHING CORPS ENTITY DOES NOT DIRECTLY RUN ANY PROGRAMS, AND THEREFORE IS ITSELF INELIGIBLE TO BE A SERVICE AND CONSERVATION CORPS MEMBER, IT MAY PETITION TO THE CORPS NETWORK TO JOIN AT THE AFFILIATE MEMBER CATEGORY AND HAVE ITS SUBUNITS PAY THE MINIMUM SERVICE AND CONSERVATION CORPS MEMBER DUES AMOUNT. SERVICE AND CONSERVATION CORPS MEMBERS ARE ELIGIBLE TO HOLD ELECTIVE OFFICE IN THE CORPS COUNCIL AND / OR THE BOARD OF DIRECTORS AND TO VOTE. SECTION 2. AFFILIATE MEMBERS. ANY UNIT OF GOVERNMENT OR PUBLIC OR PRIVATE NOT-FOR-PROFIT OR FOR-PROFIT ORGANIZATION CURRENTLY PLANNING OR INTERESTED IN PROMOTING AND ASSISTING CONSERVATION AND SERVICE CORPS PROGRAMS OR WHICH OPERATE SIMILAR PROGRAMS MAY BECOME AFFILIATE MEMBERS. AFFILIATE MEMBERS MAY NOT HOLD ELECTIVE OFFICE AND SHALL HAVE NO VOTE, BUT MAY HAVE REPRESENTATIVES SERVE ON BOARD-APPOINTED OR COUNCIL-APPOINTED COMMITTEES. SECTION 3. CONTRIBUTING INDIVIDUAL MEMBERS. ANY INDIVIDUAL WHO IS INTERESTED IN PROMOTING THE OBJECTIVES OF THE CORPS NETWORK MAY BECOME A CONTRIBUTING INDIVIDUAL MEMBER. CONTRIBUTING INDIVIDUAL MEMBERS MAY NOT HOLD ELECTIVE OFFICE AND SHALL HAVE NO VOTE, BUT MAY SERVE ON BOARD-APPOINTED COMMITTEES. PERSONS AFFILIATED WITH A SERVICE AND

CONSERVATION CORPS MEMBER MAY BECOME CONTRIBUTING INDIVIDUAL MEMBERS IN

Schedule O (Form 990 or 990-EZ) (2010)

Schedule O (Form 990 or 990-EZ) (2010) Page 2 Name of the organization **Employer identification number** 52-1480202 THE CORPS NETWORK ADDITION TO THEIR ORGANIZATION'S SERVICE AND CONSERVATION CORPS MEMBERSHIP. DESIGNATED REPRESENTATIVES OF SERVICE AND CONSERVATION CORPS MEMBERS RETAIN THEIR FULL VOTING PRIVILEGES. SECTION 4. SUPPORTING ORGANIZATION MEMBERS. A PROGRAM, OTHER THAN A SERVICE OR CONSERVATION CORPS, MAY BECOME A SUPPORTING MEMBER FOR THE PURPOSE OF SUBSCRIBING TO THE CORPS NETWORK'S SPONSORED CORPSMEMBER HEALTH INSURANCE PLAN. FORM 990, PART VI, SECTION A, LINE 7A: ALL ORGANIZATIONAL MEMBERS MAY VOTE FOR MEMBERS OF THE BOARD OF DIRECTORS. FORM 990, PART VI, SECTION B, LINE 11: THE FINAL DRAFT 990 IS CIRCULATED ELECTRONICALLY TO THE FINANCE AND AUDIT COMMITTEE MEMBERS BEFORE IT IS SUBMITTED TO THE IRS. THE COMMITTEE MEMBERS MEET VIA CONFERENCE CALL TO DISCUSS AND APPROVE THE RETURN. A NOTICE WILL THEN BE SENT TO THE FULL BOARD THAT THE RETURN IS AVAILABLE FOR THEM TO REVIEW ELECTRONICALLY. FORM 990, PART VI, SECTION B, LINE 15A: THE CORPS NETWORK CONTRACTED WITH HR DYNAMICS IN 2008 TO COMPLETE A WAGE COMPARISON ANALYSIS FOR THE CEO AND THE OTHER STAFF. THIS REPORT CONCLUDED THAT WAGES FOR SENIOR STAFF AT THE CORPS NETWORK LAGGED CONSIDERABLY BEHIND THE MARKET, ESPECIALLY FOR THE CEO. THE PERSONNEL COMMITTEE MET IN JULY, 2008, TO REVIEW THE REPORT, AND AGAIN IN SEPTEMBER WITH THE HR DYNAMICS CONSULTANT TO REVIEW THE RECOMMENDATIONS OF THE STUDY. THE COMMITTEE MET AGAIN IN DECEMBER TO

WITH ANNUAL ADJUSTMENTS MADE FOR COLA. IN JANUARY 2009, THE PERSONNEL

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CONSIDER DATA COLLECTED IN 2006 BY THE CORPS NETWORK IN A SURVEY OF CEO

SALARIES. THE PERSONNEL COMMITTEE USED THIS AS A BASIS FOR COMPARABLES,

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Name of the organization  THE CORPS NETWORK	Employer identification number 52-1480202
COMMITTEE HELD A JOINT CALL WITH THE EXECUTIVE COMMITTEE	TO FINALIZE A
RECOMMENDATION FOR SALLY PROUTY'S COMPENSATION. THIS RECO	MMENDATION
RESPONDED TO THE RECOMMENDATIONS OF THE HR DYNAMICS STUDY	IN RELATION TO
THE DATA ON CEO COMPENSATION AVAILABLE FROM CORPS. THE B	OARD FOLLOWED AN
EXTENSIVE AND DELIBERATE PROCESS TO DETERMINE A REASONABL	E SALARY FOR THE
CEO. THERE HAS BEEN NO SALARY INCREASE SINCE FEBRUARY 20	09.
FORM 990, PART VI, SECTION C, LINE 19: THE 990 IS POSTED	ON GUIDESTAR'S
WEBSITE. UPON REQUEST, THE ORGANIZATION HAS FURNISHED CO	PIES OF THE 990
AND ANY OTHER DOCUMENTS THAT ARE OPEN TO PUBLIC INSPECTIO	N.
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